

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

Substitute for Form PTO-1360
(For use with Form PTO/SB/06)

Application Number

10568241

Filing Date

Applicant(s) **Donald Highgate**

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1		1			
2		1		1		
3		1		1		
4		2		1		
5		(1)		1		
6		(1)		1		
7		(1)		1		
8		(1)		1		
9		(1)		1		
10		(1)		1		
11		(1)		1		
12		(1)		1		
13		(1)		1		
14		(1)	1			
15		1		1		
16		1		1		
17		(1)		1		
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Total Indep.	1		2		0	
Total Depend	17	↙	18	↙	0	↙
Total Claims	18		20		0	

	Indep	Depend	Indep	Depend	Indep	Depend
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